

BEST AVAILABLE COPY

SERIAL NUMBER <div style="text-align: center;">09/411,418</div>	FILING DATE <div style="text-align: center;">10/01/99</div>	CLASS <div style="text-align: center;">395</div>	GROUP ART UNIT <div style="text-align: center;">2763</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">99-TK-257</div>
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APPLICANT

JOHN R. CAREY, BRISTOL, UNITED KINGDOM.

****CONTINUING DOMESTIC DATA*******

VERIFIED

H.D *None*

****371 (NAT'L STAGE) DATA*******

VERIFIED

H.D *None*

****FOREIGN APPLICATIONS*******

VERIFIED

H.D *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/27/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GBX	SHEETS DRAWING 6	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 11
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Verified and Acknowledged H.D
 Examiner's Initials Initials

ADDRESS

LISA K JORGENSON
 STMICROELECTRONICS INC
 1310 ELECTRONICS DR.
 MAIL STOP 2346
 CARROLLTON TX 75006

TITLE

METHOD DESIGNING AN INTEGRATED CIRCUIT

FILING FEE RECEIVED <div style="text-align: center;">\$1,604</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>
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